

Treatment Programs and Rehabilitation

- Wellness and Recovery Planning
- The Wellness and Recovery Planning Team (WRPT)
- Provision of Treatment, Rehabilitation, and Supplemental Activities
- Recovery and Mall Services (RMS)
- Psychosocial Rehabilitation Mall (PSR Mall)
- Central Medical Services
- Trial Competency Program
- Mentally Disordered Offenders Programs
- Mentally Ill Prisoner Programs

Program Management is responsible to ensure a safe and therapeutic environment through the appropriate management of resources and the provision of recovery based treatment and rehabilitation services specific to the individuals' needs.

ASH utilizes the Recovery Model of Psychosocial Rehabilitation. The Recovery Model incorporates the elements of hope, choice, empowerment, respect, and self-determination for the individuals served, while supporting the individual's recovery through a variety of cognitive, social, and functional skill-building strategies. The model is growth oriented and normalizing. It necessitates the individual's participation and collaboration in the Wellness and Recovery planning process and emphasizes his strengths over his limitations.

The residential treatment programs, in conjunction with Recovery and Mall Services (RMS), provide a variety of individual, small-group, unit and programwide skills training, rehabilitation, and supplemental activities. These activities are prescribed by the Wellness and Recovery Planning Team (WRPT) according to the individual's identified needs. When indicated, individual psychotherapy, vocational training, and educational training are also provided.

WELLNESS AND RECOVERY PLANNING

Wellness and Recovery planning is directed toward the goal of helping individuals to recover from psychiatric disability, which includes the reduction of symptoms, acquisition of skills for coping with the effects of mental illness, successful fulfillment of constructive adult roles, and the development of supports, which in combination will permit maximum independence and quality of life. The planning process offers the individual, family members, relatives, significant others, and authorized representatives full opportunity to participate meaningfully in the recovery and discharge process.

Each individual will have a comprehensive, individualized **Wellness and Recovery Plan (WRP)** based on the integrated assessments of mental health professionals. Therapeutic and rehabilitation services are designed to address each individual's needs and to assist the individual in meeting their specific recovery and wellness goals, consistent with generally accepted professional standards of care. Such plans are developed and reviewed on a regular basis in collaboration with the individual.

THE WELLNESS AND RECOVERY PLANNING TEAM (WRPT)

The Wellness and Recovery Planning Team (WRPT) consists of an interdisciplinary core of members, including at least the individual served, treating psychiatrist, psychologist, rehabilitation therapist, social worker, registered nurse, and psychiatric technician sponsor and may include the individual's family, guardian, advocates, and attorneys as appropriate. Based on the individual's needs, other members may

also be included, but not limited to: dietitian, pharmacist, teacher, physical therapist, speech-language pathologist, occupational therapist, vocational services staff, and psychiatric nurse practitioner.

Families and officials (CONREPs, Conservators, etc.) who will be responsible for outpatient services may be included as active participants with the team and may be of considerable assistance in assessment, planning, treatment, and post-hospital care of the individuals. At the time of admission, families shall be notified so that they may meet with the team, provided the individual gives consent for notification.

PROVISION OF TREATMENT, REHABILITATION, AND SUPPLEMENTAL ACTIVITIES

Our goal is to provide individualized active recovery services that focus on maximizing the functioning of persons with psychiatric disabilities. We endeavor to identify, support, and build upon each recovering individual's strengths to achieve their maximum potential towards their hopes, dreams, and life goals. The concept of recovery shall be the guiding principal and operating framework for the mall system of care we provide at our psychiatric facility.

RECOVERY AND MALL SERVICES (RMS):

RMS is a clinical treatment program providing specialized day and evening services for all individuals upon direct referral from the Wellness and Recovery Planning Teams throughout the hospital. Services may be provided centrally or on an outreach basis on the individual's residential unit, either regularly scheduled or on a consultative basis, as requested by the Wellness and Recovery Team. RMS also provides space for groups conducted by staff from the residential units.

PSYCHOSOCIAL REHABILITATION (PSR) MALL

The PSR Mall is a centralized approach to delivering services where the individuals served and the staff from throughout the hospital come together to participate in services. Malls represent more of a centralized system of programming, rather than a reference to a specific building or certain location. Mall interventions are provided, as much as possible, in the context of real-life functioning and in the rhythm of life of the individual. Thus, a PSR mall extends beyond the context of a building or "place," and its services are based on the needs of the individual, not the needs of the program, the staff members, or the institution.

PSR Malls are designed to ensure that each individual receives individualized services to promote his increased wellness and ability to thrive in the world. All decisions regarding what is offered through each mall are driven by the needs of the individuals served. Mall services are provided in an environment that is culturally sensitive and strengths based.

Services facilitated through the mall include courses and activities designed to help with symptom management, personal skills development, and life enrichment. The mall capitalizes on human and staff resources from the entire hospital, to provide a larger diversity of interaction and experiences for all individuals in the mall.

CENTRAL MEDICAL SERVICES

Central Medical Services (CMS) provides definitive medical care and evaluation to all residents in the hospital. These services include radiology, public health, laboratory, physical therapy, dentistry, pharmacy, medical clinics, unit sick call, contractual services inside and outside the hospital, and review of community-based consultations. Services are available to residents on referral from general physicians and psychiatrists who have primary responsibility for the care of individuals on residential treatment units. CMS also clinically supervises nursing staff who provide occupational health services to employees.

TRIAL COMPETENCY PROGRAM

Individuals admitted to the hospital under PC 1370 as Incompetent to Stand Trial receive specialized programming targeted specifically at helping the individual gain the knowledge and skills necessary to return to court as competent to understand court proceedings and effectively participate in their defense.

MENTALLY DISORDERED OFFENDERS (MDO) PROGRAM:

Individuals are paroled to the hospital by authority of the Board of Paroles under provisions of PC 2962 and PC 2964. Individuals may be released to parole, placed in Conditional Release Programs or committed to civil commitment.

MDOs lack information about medication and symptom management. A significant history of substance abuse is also present in most of these individuals. Groups designed to communicate relevant, specific information and teach skills related to successful adaptation to the expected Conditional Release Program placement are primary modes of treatment.

MENTALLY ILL PRISONER PROGRAM:

These individuals are mentally ill inmates from CDC-R committed under PC 2684 in accordance with the Memorandum of Understanding between the Department of Corrections and Rehabilitation and Department of Mental Health. Individuals admitted to this program required evaluation and treatment not available within CDC-R and will be either paroled, returned to CDC-R, or continue hospitalization under a civil commitment.